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Bib Data Sheet

CONFIRMATION NO. 1340

SERIAL NUMBER 10/010,678	FILING DATE 12/07/2001 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 19109DE
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APPLICANTS
Glenn J. Gormley, Westfield, NJ;
Keith D. Kaufman, Westfield, NJ;
Elizabeth Stoner, Westfield, NJ;
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**** CONTINUING DATA *******
THIS APPLICATION IS A DIV OF 09/699,906 10/30/2000 PAT 6,355,649 B1. *6/3/02*
WHICH IS A DIV OF 09/448,930 11/24/1999 PAT 6,174,892 *checked*
WHICH IS A DIV OF 09/135,512 03/20/1998 ABN
WHICH IS A DIV OF 08/601,497 02/14/1996 PAT 5,760,046
WHICH IS A CON OF 08/214,905 03/17/1994 PAT 5,547,957
WHICH IS A CIP OF 08/138,520 10/15/1993 ABN

**** FOREIGN APPLICATIONS *******
none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 01/03/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Signature]</i> Initials		

ADDRESS
000210

TITLE
Transdermal treatment with 5-alpha reductase inhibitors

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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